

# Lack of resources compounds Papua New Guinea tragedy

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Each day brings new and increasingly horrifying stories about the human cost of the tsunami tidal wave that destroyed villages along Papua New Guinea's northern coast on July 17.

The PNG government announced on Thursday, six days after the wave struck, that it was abandoning all efforts to recover bodies from the Sissano lagoon, in the heart of the devastated area. Emergency coordinator Colonel Tom Kanene said the lagoon was so contaminated by rotting corpses that it posed a major health threat. All police, military and civilian personnel were withdrawn and the 120-square-kilometre region was declared a no-go area.

The hundreds of decomposing bodies trapped in the lagoon, mangrove swamps and adjoining waterways will simply be left for sharks, crocodiles, wild dogs and feral pigs to devour. Instead of hurriedly burying the dead in shallow pits on the spot or dousing corpses in petrol and torching them, the government will blast a second opening to the lagoon and hope that the ocean tide will flush away the remains.

Estimates of the death toll now range up to 8,000. Most previous guesses were based on statements that 10,000 people lived along the coastal strip. But a doctor at Vanimo Hospital, Dr John Novette, has produced a 1990 census showing that 13,152 people lived in the affected villages.

Whatever the final figure, and it can only be a rough approximation, this is one of PNG's worst disasters. Not only have thousands been killed, hundreds have been seriously wounded and at least three villages, countless houses, several schools and other facilities have been destroyed. Those villagers fortunate enough to survive are homeless, poverty-stricken and traumatised; their only possessions, the clothes they stand in.

The remaining villages, relief camps and makeshift hospitals are now crowded to capacity with little or no food or medical supplies. After days of pleading for assistance, emergency workers have found that bagged rice supplied by PNG authorities is infested with weevils.

The stretched health services make daily frantic appeals for the basic medical supplies--morphine, antiseptic solution, antibiotics, bandages and blood. Young patients who were not rescued or treated for days are having their gangrenous limbs being amputated. One distressed doctor referred to 'meatball surgery.'

The contrast between the sophisticated medical facilities available just hours away in Australia and the treatment of the tidal wave victims is stark. One relief worker told the media: 'We would beat this crisis with one charter flight out of Australia. Just give us 24 people--a neurosurgeon, surgeons and nurses for the hospitals here and at Wewak and Aitape for a few weeks, and chuck on board the supplies we need and we'd get on top of it.'

Elsewhere in PNG and in neighbouring Irian Jaya, mining and timber companies, including BP, Mobil, Chevron, BHP, Placer Pacific, Oil Search and Freeport McMoRan Copper, are producing vast profits. One day of their earnings could easily rectify the immediate health problems in the area and dramatically raise the living standards of its people.

Even the limited media coverage of the tragedy, in which medical staff and survivors have been interviewed live on television via satellite, standing in front of tent hospitals or primitive shelters, has only highlighted the extent to which the area has been deprived of basic facilities, including the sophisticated telecommunications that serve global capitalism.

Nine months before the tsunami, government budget cuts closed the local radio station. This was followed by the closure of the hospital. The outside world first learned of the July 17 disaster not by television or even telephone, but by a two-way radio message from a Catholic missionary--a distress signal that was not heard or acted upon for at least 13 hours.

If essential telecommunications had existed and news of the disaster had been immediately acted upon, with the overnight dispatch of advanced rescue and medical teams, there is no doubt that many lives could have been saved.

The last tsunami to hit the West Sepik coastline was in 1907. Little has changed for the West Sepik people since then. The province has the lowest literacy, lowest life expectancy and highest infant mortality rates in PNG--a country with the lowest living standards of all Pacific peoples. Life expectancy for women in West Sepik is only 45 years and only marginally higher for men.

Within a few weeks, the emergency medical staff, aid workers and reporters will have left the disaster zone. The villagers will have no phones, decent hospitals, roads or schools. Nor will there be a disaster warning system or even a radio station.



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